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| <b><i>Index of Claims</i></b><br><br> | <b>Application/Control No.</b><br><br>10580234 | <b>Applicant(s)/Patent Under Reexamination</b><br><br>KIM ET AL. |
|  | <b>Examiner</b><br><br>William E Tapolcai      | <b>Art Unit</b><br><br>3744                                      |

|   |                 |   |                   |   |                     |   |                 |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | <b>Rejected</b> | - | <b>Cancelled</b>  | N | <b>Non-Elected</b>  | A | <b>Appeal</b>   |
| = | <b>Allowed</b>  | ÷ | <b>Restricted</b> | I | <b>Interference</b> | O | <b>Objected</b> |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |            |            |            |  |  |  |  |  |  |
|---|----------|------------|------------|------------|--|--|--|--|--|--|
| CLAIM   |          | DATE       |            |            |  |  |  |  |  |  |
| Final   | Original | 05/29/2008 | 09/02/2008 | 12/18/2008 |  |  |  |  |  |  |
|   | 1        | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 2        | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 3        | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 4        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 5        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 6        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 7        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 8        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 9        | ÷          | O          | O          |  |  |  |  |  |  |
|   | 10       | ÷          | O          | O          |  |  |  |  |  |  |
|   | 11       | ÷          | O          | O          |  |  |  |  |  |  |
|   | 12       | ÷          | O          | O          |  |  |  |  |  |  |
|   | 13       | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 14       | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 15       | ÷          | O          | O          |  |  |  |  |  |  |
|   | 16       | ÷          | O          | O          |  |  |  |  |  |  |
|   | 17       | ÷          | O          | =          |  |  |  |  |  |  |
|   | 18       | ÷          | O          | =          |  |  |  |  |  |  |
|   | 19       | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 20       | ÷          | ✓          | ✓          |  |  |  |  |  |  |
|   | 21       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 22       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 23       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 24       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 25       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 26       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 27       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 28       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 29       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 30       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 31       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 32       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 33       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 34       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 35       | ÷          | -          | -          |  |  |  |  |  |  |
|   | 36       | ÷          | -          | -          |  |  |  |  |  |  |

|  |  |  |
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|  | <b>Examiner</b><br><br>William E Tapolcai      | <b>Art Unit</b><br><br>3744                                      |

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| <input type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b> |          | <input type="checkbox"/> <b>CPA</b> |            | <input type="checkbox"/> <b>T.D.</b> |  | <input type="checkbox"/> <b>R.1.47</b> |  |  |  |
|---|----------|-------------------------------------|------------|--------------------------------------|--|--|--|--|--|
| <b>CLAIM</b>  |          | <b>DATE</b>                         |            |                                      |  |  |  |  |  |
| Final   | Original | 05/29/2008                          | 09/02/2008 | 12/18/2008                           |  |  |  |  |  |
|   | 37       | ÷                                   | =          | =                                    |  |  |  |  |  |
|   | 38       | ÷                                   | -          | -                                    |  |  |  |  |  |
|   | 39       | ÷                                   | ✓          | ✓                                    |  |  |  |  |  |
|   | 40       | ÷                                   | -          | -                                    |  |  |  |  |  |
|   | 41       |                                     | O          | =                                    |  |  |  |  |  |